

PTO/SB/83 (05-03)

Approved for use through 11/30/2005. OMB 0651-0035

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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

T	10/615 407
Application Number	10/615,407
Filing Date	July 9, 2003
First Named Inventor	Phillip M. SANTISI
Art Unit	3677
Examiner Name	James R. Brittain
Attorney Docket Number	544482000100

To: P	ommissioner for Patents O. Box 1450 exandria, VA 22313-1450							
I hereby	apply to withdraw as attorney or ager	nt for the a	bove identified p	atent a	pplica	ition.		
	ons for this request are: tion is being transferred to ar	nother a	ttorney.					
This requ	est is being made at the request o	of the ass	ignee, Techno	logy \$	Syste	ms S	Services	
1. T	he correspondence address is NOT a	affected by	this withdrawal.				-	
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Cus	tomer Number		—					
	<u> </u>							
OR				<u> </u>				
X Firm	or Idual Name James Remenick (Powe	ell Goldst	ein LLP)					
Address	901 New York Avenue, NW Third Floor				•			
City	Washington St	tate	DC			Zip	20001-4413	
Country	USA							
Telephone	(202)347-0066			Fax	(202) 624	-7222	
X Th	s request is made on behalf of myself	f and						
	all the attorneys/agents of record,							
	the attorneys/agents (with registration	n numbers) listed on the att	ached	paper	(s), or	•	
X the attorneys/agents associated with Customer Number 25227								
This requ	est is enclosed in triplicate (including	anv attact	nments).					
Name	Wayne C. Jaeschke, Jr. Registr							
Signature	Ww							
Date	January 27, 2005							
	ithdrawal is effective when approved rather than tion date of a time period for response or possibl							rawal and

I hereby certify that this correspondence an envelope addressed to: Commission	being deposited with the U.S. Postal Service with sufficient postage as First Clar for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown bel	ss Mail, in ow.
Dated: 112105 Signatu	(Chimin Taylor)	
		

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I hereb	y apply to v	withdraw as attorney or a	gent for the	above identified p	patent :	applica	ation.		
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This req	This request is being made at the request of the assignee, Technology Systems Services								
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Cus	stomer Nun	mber					<u>.</u>		
OR									
X Firm	n or vidual Name	James Remenick (Po	well Golds	tein LLP)					
Address	901 New Third Floo	York Avenue, NW					<u>-</u>	· · · · · · · · · · · · · · · · · · ·	-
City	Washing	ton	State	DC			Zip	20001-4413	
Country	USA				· · · · · · · · · · · · · · · · · · ·				
Telephone	(202)347-	-0066			Fax	(202) 624	-7222	
X Th	nis request i	is made on behalf of mys	elf and						
	all the atto	orneys/agents of record,							
	the attorne	eys/agents (with registrat	ion numbers	s) listed on the att	ached	paper	(s), o	r	
X	the attorne	eys/agents associated wi	th Customer	Number	2	5227			
This requ	est is ençlo	osed in triplicate (includi	ng any attac	hments).					
Name	Wayne	C. Jaeschke, Jr. Regi	stration No	. 38,503					
Signature	∍ We								
Date	Januar	<u> </u>							
NOTE: V	Vithdrawal is e ation date of a	ffective when approved rather the time period for response or poss	an when receiv sible extension p	red. Unless there are period, the request to	et least : withdraw	30 days i v is norm	betwee	n approval of withdrapproved.	awal and

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	m or dividual Name	James Remenick (Po	well Golds	tein LLP)					
Address	901 New Third Floo	v York Avenue, NW or							
City	Washing	gton	State	DC			Zip	20001-4413	
Country	USA							•	
Telephon	e (202)347	(202)347-0066 Fax (202) 624-7222							
X T	his request	is made on behalf of mys	elf and						
	all the atto	orneys/agents of record,							
	the attorneys/agents (with registration numbers) listed on the attached paper(s), or								
X the attorneys/agents associated with Customer Number 25227									
This rec	uest is ençl	osed in triplicate (includi	ng any attac	hments).					
Name		C. Jaeschke, Jr. Regi			_				
Signatu	Signature Wur								
Date	Januar	ry 27, 2005							
NOTE: the exp	Withdrawal is e iration date of a	effective when approved rather the time period for response or pos.	nan when receiv sible extension	ed. Unless there are period, the request to	at least . withdraw	30 days l v is norm	elly dis	n approval of withdra approved.	wal and

Dated: 12705 Signature: (Chimin Taylor)	I hereby certify that this cor an envelope addressed to:	respondence is being of Commissioner for Pate	leposited witents, P.O. B	h the U.S. Po x 1450, Alexa	stal Service with sufficient postage as First Class Mail, in andria, VA 22313-1450, on the date shown below.
	Dated: 12705	Signature:	\leftarrow		(Chimin Taylor)